

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation Working America		3. FEC Identification Number C C90011156
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16th St., NW		
(c) City, State and ZIP Code Washington DC 20006		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
- ☐ 24-Hour Report
☒ 48-Hour Report

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

09 / 15 / 2012
 THROUGH
09 / 15 / 2012

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES

1046.42

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Timothy Gray

Timothy Gray

09/17/2012

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 9
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee Mark Asher		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 315 Oak Manor		Amount 39.91	
City St. Louis	State MO	Zip Code 63119	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PP89
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mark Asher		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 315 Oak Manor		Amount 39.91	
City St. Louis	State MO	Zip Code 63119	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PPG2
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Carl Beverly		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 2437 7th Blvd		Amount 39.91	
City St. Louis	State MO	Zip Code 63104	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PP47
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	119.73
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

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NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee Carl Beverly		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 2437 7th Blvd		Amount 39.91	
City St. Louis	State MO	Zip Code 63104	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Madeline Franklin		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 4731 Ashland Ave		Amount 59.87	
City St. Louis	State MO	Zip Code 63115	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Madeline Franklin		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 4731 Ashland Ave		Amount 59.87	
City St. Louis	State MO	Zip Code 63115	
Purpose of Expenditure Salary and Benefits		Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		159.65	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 9
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NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee Cynthia Griffin-Clinton		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 4517 Oakland Ave		Amount 53.90	
City Saint Louis	State MO	Zip Code 63110-1522	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PPF1
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cynthia Griffin-Clinton		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 4517 Oakland Ave		Amount 53.90	
City Saint Louis	State MO	Zip Code 63110-1522	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PPF4
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Heather Rozzo		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 819 SW 14th Court		Amount 22.50	
City Fort Lauderdale	State FL	Zip Code 33315	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZ3PPN1
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	130.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

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NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee Heather Rozzo		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 819 SW 14th Court		Amount 22.50	
City Fort Lauderdale	State FL	Zip Code 33315	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZ3PPQ7
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Joshua D Summerford		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 407 Warner St Apt 1		Amount 22.50	
City Cincinnati	State OH	Zip Code 45219	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZ3PPP9
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Joshua D Summerford		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 407 Warner St Apt 1		Amount 22.50	
City Cincinnati	State OH	Zip Code 45219	
Purpose of Expenditure Per Diem		Category/ Type	Transaction ID : VN7CZ3PPR5
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		67.50	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee Cliff Kodero		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 7701 Circle Drive, Apt. C		Amount 59.87	
City St. Louis	State MO	Zip Code 63121	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PP63
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cliff Kodero		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 7701 Circle Drive, Apt. C		Amount 59.87	
City St. Louis	State MO	Zip Code 63121	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PPE6
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Thomas Simmons		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 3633 Cook Avenue		Amount 59.87	
City St. Louis	State MO	Zip Code 63113	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PP55
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	179.61
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

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NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee Thomas Simmons		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 3633 Cook Avenue		Amount 59.87 Transaction ID : VN7CZ3PPD8	
City St. Louis	State MO		
Purpose of Expenditure Salary and Benefits	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Water Tower Inn, St. Louis University		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 3545 Lafayette Ave.		Amount 22.57 Transaction ID : VN7CZ3PPH0	
City St. Louis	State MO		
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Water Tower Inn, St. Louis University		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 3545 Lafayette Ave.		Amount 22.57 Transaction ID : VN7CZ3PPJ8	
City St. Louis	State MO		
Purpose of Expenditure Lodging	Category/ Type	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		105.01	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee Water Tower Inn, St. Louis University		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 3545 Lafayette Ave.		Amount 22.57	
City St. Louis	State MO	Zip Code 63104	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZ3PPK5
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Water Tower Inn, St. Louis University		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 3545 Lafayette Ave.		Amount 22.57	
City St. Louis	State MO	Zip Code 63104	
Purpose of Expenditure Lodging		Category/ Type	Transaction ID : VN7CZ3PPM3
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Christopher Willcox		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 301 Grasslands Ct.		Amount 59.87	
City St. Louis	State MO	Zip Code 63376	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PP21
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	105.01
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

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NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee Christopher Willcox		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 301 Grasslands Ct.		Amount 59.87	
City St. Louis	State MO	Zip Code 63376	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PPA4
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lisha Williams		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 210 Bellerive		Amount 59.87	
City St. Louis	State MO	Zip Code 63111	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PPB9
Name of Federal Candidate Supported or Opposed by Expenditure: W TODD AKIN		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Lisha Williams		Date MM / DD / YYYY 09 / 15 / 2012	
Mailing Address 210 Bellerive		Amount 59.87	
City St. Louis	State MO	Zip Code 63111	
Purpose of Expenditure Salary and Benefits		Category/ Type	Transaction ID : VN7CZ3PPB2
Name of Federal Candidate Supported or Opposed by Expenditure: CLAIRE MCCASKILL		Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 31772.26		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	179.61
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	1046.42